AGORD. CERTIF	FICATE OF INS	URANCE		ISSU	E DATE (MM/DD/YY)						
Meeker Sharkey & MacBean 21 Commerce Drive Cranford, NJ 07016 908-272-8100 INSURED Soc.Hill & University Hts.III c/o Eastern Community Mgmt 225 Highway 35 Red Bank NJ 07701		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY TH POLICIES BELOW. COMPANIES AFFORDING COVERAGE COMPANY A St. Paul Fire & Marine									
						COMPANY B					
						COMPANY C COMPANY D COMPANY E					
		COVERAGES THIS IS TO CERTIFY THAT THE POLINDICATED, NOTWITHSTANDING AN CERTIFICATE MAY BE ISSUED OR MEXCLUSIONS AND CONDITIONS OF	CIES OF INSURANCE LISTED BEL V REQUIREMENT, TERM OR COM	OW HAVE BEEN ISSU	FRACT OR OTHER					DOCUMENT WITH RESPEC	
		CO TYPE OF INSURANCE	POLICY NUMBER		POLICY EXPIRATION					V	TS
		GENERAL LIABILITY X COMMERCIAL GENERAL LIABILITY CLAIMS MADE X OCCUR. OWNER'S & CONTRACTOR'S PROT.	INDER	1/01/93	1/01/94	GENERAL AGGREGATE PRODUCTS-COMP/OP AGG. PERSONAL & ADV. INJURY EACH OCCURRENCE FIRE DAMAGE (Any one fire)	s 200000 s 100000 s 100000 s 100000 s 5000				
		AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS			N. C. F. S. M. J. L. S.	MED. EXPENSE (Any one person COMBINED SINGLE LIMIT BODILY INJURY (Per person)	s 500 s				
NON-OWNED AUTOS GAPAGE LIABILITY				BODILY INJURY (Per accident) PROPERTY DAMAGE	\$						
EXCESS LIABILITY UMBRELLA FORM OTHER THAN UMBRELLA FORM			1	EACH OCCURRENCE AGGREGATE	\$ \$						
Worker's Compensation And Employers' Liability				STATUTORY LIMITS EACH ACCIDENT DISEASE—POLICY LIMIT DISEASE—EACH EMPLOYEE	\$ \$						
OTHER Blanket Building Bl & Contents	INDER	1/01/93.	1/01/94	\$11,034,430.	1						
ESCRIPTION OF OPERATIONS/LOCATIONS/VEI DWNER: LINK CLEMONS AND OS LCC: 55 YANCY DRIVE, NEWAR	SIE CLEMONS, H/W	1.03 BLOCK: 406	Fide	lity Limit \$1	00,000.						
ERTIFICATE HOLDER	r.	ANCELLATION									

K. HOWNANTAN MORICAGE INC., THEIR SUCCESSORS AND ASSIGNS FINE INTEREST MAY APPEAR

AS THEIR INTEREST MAY APPEAR

MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE ONE INDUSTRIAL WAY WEST, BUILDING D EATONIOWN, NJ 07724

AUTHORIZED REPRESENTATIVE

010036000

ACORD 25-S (7/90)

KH0V033719

LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR

LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.